



PART B - FEE(S) TRANSMITTAL

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21069 7590 02/03/2006

AMGEN INC.
MAIL STOP 28-2-C
ONE AMGEN CENTER DRIVE
THOUSAND OAKS, CA 91320-1799

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TONYA TORRACA	(Depositor's name)
TONYA TORRACA	(Signature)
MAY 3, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/046,622	01/10/2002	Guoqing Chen	A-737A	2922

TITLE OF INVENTION: SUBSTITUTED AMINE DERIVATIVES AND METHODS OF USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/03/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS	03794/2006 TBESHAH2 00000030 010519	10046622	
KUMAR, SHAILENDRA	1621	546-277100	01 FC:1501	1400.00 DA	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).		2. For printing on the patent front page, list up to 3 registered patent attorneys or agents OR, alternatively,			
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		1 <input type="checkbox"/> 1504			
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2 <input type="checkbox"/> 8001			
		3 <input type="checkbox"/> 300.00 DA			

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Amgen Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Thousand Oaks, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 5

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A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-0519 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Joseph W. Bullock

Date May 3, 2006

Typed or printed name Joseph W. Bullock

Registration No. 37,103

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